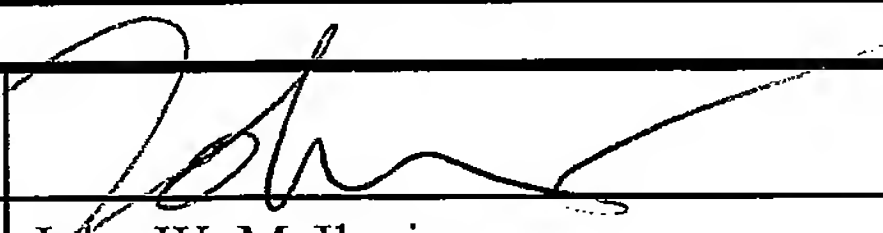


<b>FEE TRANSMITTAL</b>		<i>Complete if Known</i>	
		Application Number	10/581,375
		Filing Date	12/6/2004
		First Named Inventor	Simon Adriaan Troost
		Examiner Name	Stephanie E. Williams
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3754
<b>TOTAL AMOUNT OF PAYMENT</b>		(\$)	1,490.00
		Attorney Docket	3135 - 061626

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account            Deposit Account Number: <u>23-0650</u> Deposit Account Name: _____	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

<b>FEE CALCULATION</b> (All the fees below are due upon filing or may be subject to a surcharge.)							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	380	95	620	310	250	125	_____
Design	250	125	120	60	160	80	_____
Plant	250	125	380	190	200	100	_____
Reissue	380	190	620	310	750	375	_____
Provisional	250	125	0	0	0	0	_____
<b>2. EXCESS CLAIM FEES</b>							
						<u>Small Entity</u>	
<u>Fee Description</u>						<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)						60	30
Each independent claim over 3 (including Reissues)						250	125
Multiple dependent claims						450	225
<u>Total Claims</u>	<u>- 20 or HP</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
_____	- _____	= _____	x _____	= _____	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
HP = highest number of total claims paid for, if greater than 20.						_____	_____
<u>Indep. Claims</u>	<u>- 3 or HP</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____	- _____	= _____	x _____	= _____			
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____	- 100 = _____	/ 50 = _____ (round up to a whole number)	x _____	= _____			
<b>4. OTHER FEE(S)</b>							
Non-English Specification,      \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2-month Petition for Ext. of Time (\$560); RCE (\$930)						<u>\$1,490.00</u>	

<b>SUBMITTED BY</b>		
Signature		Registration No. 34,219 (Attorney/Agent)
Name (Print/Type)	John W. McIlvaine	Telephone 412-471-8815 Date February 15, 2012